SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) MR. BRIAN COX		Transaction ID : SA17.188541
Mailing Address 179 VILLA DI ESTE TER		Date of Receipt O1 27 2016
UNIT 105 City	State Zip Code	01 27 2016
LAKE MARY	FL 32746-1650	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer MERRILL LYNCH	Occupation FINANCIAL ADVISOR	1000.00
Receipt For: 2016 ☐ Primary ☐ General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) RICHARD L. COX		Transaction ID : SA17.185928 Date of Receipt
Mailing Address PO BOX 2015		01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BILLINGS	State Zip Code MT 59103-2015	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF-EMPLOYED	Occupation INVESTMENTS	100.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 300.00	
Full Name (Last, First, Middle Initial) KAREN CRAIG		Transaction ID : SA17.183426 Date of Receipt
Mailing Address 640 BRIGHTSIDE LN		01 09 2016
City PASADENA	State Zip Code CA 91107-5342	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	50.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date 775.00	
Subtotal Of Receipts This Page (opt	ional)	1150.00
Total This Pariod (last name this line	number only)	